

NOTICE PUBLICATION/REGULATIONS SUBMISSION

REGULAR

See instructions on reverse)

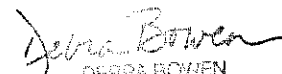
For use by Secretary of State only

STD. 400 (REV. 01-09)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2009-0526-13	REGULATORY ACTION NUMBER 2010-0217-015	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
RECEIVED FOR FILING PUBLICATION DATE MAY 26 '09 JUN 05 '09		2010 FEB 17 PM 12:29 OFFICE OF ADMINISTRATIVE LAW	
Office of Administrative Law			
NOTICE		REGULATIONS	
AGENCY WITH RULEMAKING AUTHORITY Medical Board of California			AGENCY FILE NUMBER (if any)

ENDORSED FILED
IN THE OFFICE OF

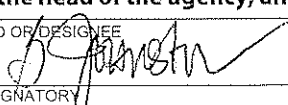
2010 MAR 29 PM 2:22


 DERRA BOWEN
 SECRETARY OF STATE

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE Notice to Consumers by Physicians		TITLE(S) 16	FIRST SECTION AFFECTED 1355.4	2. REQUESTED PUBLICATION DATE June 5 2009
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other		4. AGENCY CONTACT PERSON Kevin A Schunke	TELEPHONE NUMBER (916) 263-2368	FAX NUMBER (Optional) (916) 263-2387
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER 2009, #232	PUBLICATION DATE 6-5-2009

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Same		1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)	
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)			
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)		ADOPT 1355.4	
		AMEND -----	
TITLE(S) 16		REPEAL -----	
3. TYPE OF FILING			
<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b)) <input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) <input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) <input type="checkbox"/> File & Print <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) <input type="checkbox"/> Print Only			
4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1) n/a			
5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100) <input type="checkbox"/> Effective 30th day after filing with Secretary of State <input type="checkbox"/> Effective on filing with Secretary of State <input type="checkbox"/> §100 Changes Without Regulatory Effect <input checked="" type="checkbox"/> Effective 90 days after filing with Secretary of State			
6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY <input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) <input type="checkbox"/> Fair Political Practices Commission <input type="checkbox"/> State Fire Marshal <input checked="" type="checkbox"/> Other (Specify) Brian J. Stiger, Director of Consumer Affairs			
7. CONTACT PERSON Same as above		TELEPHONE NUMBER	FAX NUMBER (Optional) kschunke@mbc.ca.gov
8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.			
SIGNATURE OF AGENCY HEAD OR DESIGNEE 		DATE 9-1-2009	
TYPED NAME AND TITLE OF SIGNATORY Barb Johnston, Executive Director		Office of Administrative Law	

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ENDORSED APPROVED

MAR 29 2010

MEDICAL BOARD OF CALIFORNIA

ORDER OF ADOPTION

The Medical Board of California hereby adopts regulations in Division 13 of Title 16 of the California Code of Regulations to read:

Adopt section 1355.4 in Article 1 of Chapter 2 to read as follows:

1355.4. Notice to Patients.

(a) A licensee engaged in the practice of medicine shall provide notice to each patient of the fact that the licensee is licensed and regulated by the board. The notice shall include the following statement and information:

NOTICE

Medical doctors are licensed and regulated

by the Medical Board of California

(800) 632-2322

www.mbc.ca.gov

(b) The notice required by this section shall be provided by one of the following methods:

(1) Prominently posting the notice in an area visible to patients on the premises where the licensee provides the licensed services, in which case the notice shall be in at least 48-point type in Arial font.

(2) Including the notice in a written statement, signed and dated by the patient or the patient's representative and retained in that patient's medical records, stating the patient understands the physician is licensed and regulated by the board.

(3) Including the notice in a statement on letterhead, discharge instructions,
or other document given to a patient or the patient's representative, where the notice is
placed immediately above the signature line for the patient in at least 14-point type.

NOTE: Authority cited: Section 2018, Business and Professions Code; Reference:
Sections 138 and ~~680~~, Business and Professions Code.

DATED: _____

9-1-2009



BARB JOHNSTON
Executive Director
Medical Board of California